

Application must be completed in ink or typewritten

1. Name (print) Last First Middle

2. Position applying for (Show exact title - Separate application required for each examination)

3. Mailing Address No. and Street or P.O. Box No. Apt. No.

City and State Zip Code

4. *Social Security No.

Home Phone:

*Use of your Social Security number is voluntary. Social Security numbers are used for identification purposes only. If you do not wish to use your Social Security number we will assign you an identification number.

Alternate Phone:

E-mail:

City of **FRESNO**

Application for Employment

Equal Opportunity Employer
Personnel Services Department
Human Resources

2600 Fresno Street, First Floor
Fresno, California 93721-3614
Phone (559) 621-6950

Application Acceptance Policy

A complete application is required for each exam. Every applicable blank must be filled to insure proper evaluation. In item #5, do not refer to resumes or previously submitted applications. Resumes are viewed as additional information and will not be used to evaluate minimum requirements.

DEPARTMENT USE ONLY

Received by Veterans Credit

Approved by Rejected by

Reason

Notices mailed

Grade List #

5. Applicable Experience - List your current or most recent position first.

Hours worked per week	A	From Month Day Yr. To Month Day Yr.	Your Job Title:	Employer's Name and Address:
			Your Duties:	
			Salary	
Reason for Leaving:	B	From Month Day Yr. To Month Day Yr.	Your Job Title:	Employer's Name and Address:
			Your Duties:	
			Salary	
Reason for Leaving:	C	From Month Day Yr. To Month Day Yr.	Your Job Title:	Employer's Name and Address:
			Your Duties:	
			Salary	
Reason for Leaving:	D	From Month Day Yr. To Month Day Yr.	Your Job Title:	Employer's Name and Address:
			Your Duties:	
			Salary	
Reason for Leaving:	E	From Month Day Yr. To Month Day Yr.	Your Job Title:	Employer's Name and Address:
			Your Duties:	
			Salary	
Reason for Leaving:				

SEE REVERSE SIDE-USE ADDITIONAL SHEETS IF NECESSARY

6. Have you ever been convicted or declared guilty of a misdemeanor or felony by any court?

YES ☐ NO ☐

If YES, give details in item 16. Conviction is not necessarily disqualifying. Each case will be evaluated on its own merits and its applicability to this position. Failure to disclose this information will be cause for disqualification, removal from list or discharge from employment.

You may omit:

- A. Traffic violations for which the fine imposed was \$100 or less. (Any Traffic violations over \$100 must be shown.)
- B. Any offense committed prior to your 18th birthday which was finally adjudicated in a juvenile court or under a youth offender law.
- C. Any incident that has been sealed under Welfare and Institutions Code Section 781 or Penal Code Section 1203 45.

(If appointed, your fingerprints will be taken for a criminal history check. Certain positions may require a driving record check.)

7. Have you ever been terminated from any employment or ever forced to resign?

YES ☐ NO ☐

If YES, give details in item 16.

8. Are you now or have you ever been employed by the City of Fresno.

YES ☐ NO ☐

If YES, give details in item 16.

9. Are you related by blood or marriage to any person presently employed by the City of Fresno?

YES ☐ NO ☐

If YES, give name, relationship, and department in which employed.

10. Do you wish to apply for veterans credits?

YES ☐ NO ☐

If YES, acceptable documentary proof of U.S. military service Form DD214 must be submitted with this application during the filing period.

11. Selective Service Registration. Federal Law requires male U.S. citizens and aliens residing in the U.S. who are ages 18 through 25 to register with the Selective Service System.

- ☐ A. I have registered with the Selective Service System. My Selective Service Number is _____
(A copy of your Selective Service confirmation MUST be attached.)
- ☐ B. I am not required to register with the Selective Service System because I am exempt under the stated age/gender requirements.

12. Did you graduate from High School, pass the State High School Equivalency Exam., or do you possess a G.E.D. High School level Certificate?

YES ☐ NO ☐

A. Name of High School _____

B. Location of School _____

13. Colleges and Schools attended after high school.

Name and Location	Major	Total Units or Hours	Degrees Received

14. Driver's Lic. No. _____ Expires _____
Completion of this question is required only if the position for which you are applying requires the possession of a valid California Driver's License.

15. If you possess any license or certificate, give the following information:

A. Title _____

B. License No. _____ Issuing State _____

Date Issued _____ Date Expires _____

16. Additional Remarks: (Attach extra sheet if necessary)

CERTIFICATE OF APPLICANT (Read this statement carefully before signing): I hereby certify that all statements made on or in connection with this application, including those regarding my training, education and experience are true and complete to the best of my knowledge and belief, and I understand and agree that any misstatements or omissions of material fact herein will cause forfeiture on my part of all rights to employment by the City of Fresno.

Your Signature

Date